# **NOTICE**

GuideStar has been informed by the IRS of processing errors on IRS Forms 990 filed electronically between January 1, 2009, and December 3, 2010, for form year 2008. These processing errors resulted in inaccurate data appearing on the scanned images of the affected returns that are posted on GuideStar and do not reflect the information filed with the IRS.

#### These errors include:

- Part III, line 1, organization's mission description—may not reflect what was originally submitted by the nonprofit organization.
- Part VIII, line 8a, gross income for special events—values may have been transposed.
- Part IX, line 7c, other salaries and wages, management and general expenses—may show a blank where a value was originally reported.
- Schedule D, Part V, line 3a(ii), endowment funds and possession by related organizations—checkbox values may have been transposed.

GuideStar is working with the IRS to obtain a corrected copy of its form year 2008 Form 990. GuideStar will replace this Form 990 if, and when, the accurate return is made available from the IRS.

For more information, please visit <a href="http://www2.guidestar.org/rxg/help/form-year-2008-returns.aspx">http://www2.guidestar.org/rxg/help/form-year-2008-returns.aspx</a>



DLN: 93493134030990

Form 990

Department of the Treasury

## Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545-0047 2008

Inspection

▶ The organization may have to use a copy of this return to satisfy state reporting requirements Internal Revenue Service A For the 2008 calendar year, or tax year beginning 07-01-2008 and ending 06-30-2009 D Employer identification number B Check if applicable Please San Francisco Ballet Association use IRS 94-1415298 Address change label or Doing Business As E Telephone number Name change print or type. See (415) 861-5600 Initial return Specific Number and street (or P O box if mail is not delivered to street address) Room/suite **G Gross receipts** \$ 46,510,566 Instruc-455 Franklın Street Termination tions. Amended return City or town, state or country, and ZIP + 4 San Francisco, CA 94102 Application pending Name and address of Principal Officer **H(a)** Is this a group return for GLENN MCCOY affiliates? 455 FRANKLIN STREET SAN FRANCISCO, CA 941020000 H(b) Are all affiliates included? (If "No." attach a list See instructions ) Group Exemption Number 🕨 Web site: ► www sfballet org L Year of Formation 1933 M State of legal domicile CA Briefly describe the organization's mission or most significant activities Activities & Governance See Additional Data Table Check this box ┌ if the organization discontinued its operations or disposed of more than 25% of its assets 71 Number of voting members of the governing body (Part VI, line 1a)  $\cdot$   $\cdot$ 67 Number of independent voting members of the governing body (Part VI, line 1b)  $\,$  . 704 Total number of employees (Part V, line 2a) . Total number of volunteers (estimate if necessary) . 325 Total gross unrelated business revenue from Part VIII, line 12, column (C) . 7a 47,626 Net unrelated business taxable income from Form 990-T, line 34 . 7b 18,817 b **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) . . 24,691,526 19,342,158 8 9 Program service revenue (Part VIII, line 2g) . . 18,102,916 19,257,541 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 648,833 46,426 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 9,444,669 -389,894 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12 47,538,576 43,605,599 746,294 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 594,044 14 Benefits paid to or for members (Part IX, column (A), line 4) 0 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-15 Expenses 25,577,171 27,434,823 10) 16a Professional fundraising fees (Part IX, column (A), line 11e) 298,051 251,626 (Total fundraising expenses, Part IX, column (D), line 25  $\frac{2,247,680}{}$ b **17** Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) 17,883,911 16,491,788 Total expenses—add lines 13-17 (must equal Part IX, line 25, column (A)) 44,353,177 44,924,531 18 Revenue less expenses Subtract line 18 from line 12 19 3,185,399 -1,318,932 8 % **End of Year** Beginning of Year Assets of Balance 20 Total assets (Part X, line 16) 70,245,813 71,662,501 21 Total liabilities (Part X, line 26) 55,386,591 59,716,271 22 Net assets or fund balances Subtract line 21 from line 20 14,859,222 11,946,230 Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

#### **Please** Sign Here

2010-05-13 Signature of officer KIMBERLY O CARIM CFO

### Paid Preparer's **Use Only**

signature empolyed 🕨 🦵 Firm's name (or yours Deloitte Tax LLP if self-employed). address, and ZIP + 4 50 Fremont Street Phone no (415) 783-4000

May the IRS discuss this return with the preparer shown above? (See instructions) . 

Date

San Francisco, CA 94105

Type or print name and title

Preparer's

Check if

Preparer's PTIN (See Gen Inst )

# Part III Statement of Program Service Accomplishments (See the instructions.)

1	Briefly describe the organization's mission					
See Ad	ditional Data Table					
2	Did the organization undertake any significant prog	ram ser	vices during the yea	r which were not listed on	☐ Yes	✓ No
	If "Yes," describe these new services on Schedule	0				
3	Did the organization cease conducting or make sig	nıfıcant	changes in how it co	nducts any program	_	_
	services?				☐ Yes	✓ No
	If "Yes," describe these changes on Schedule O					
4	Describe the exempt purpose achievements for ear Section $501(c)(3)$ and $(4)$ organizations and $4947$ others, the total expenses, and revenue, if any, for	(a)(1) tr	usts are required to	report the amount of grant		
4a	(Code ) (Expenses \$ 29,6) As America's oldest professional ballet company and one of totalition of artistic "firsts" since its founding in 1933. It perfois Copplia choreographed by an American choreographer. Guide Francisco Ballet currently presents more than 100 performant decades, the Company has achieved an international reputational prestigious Laurence Olivier Award, its first, in the category of first non-European company elected "Company of the Year"	he three la med the f ed in its ea ces annual con as one f "Outstan	irst American production orly years by American d lly, both locally and inter e of the preeminent balle ding Achievement in Dar	s of Swan Lake and Nutcracker, ance pioneers and brothers Lew rnationally Under the direction o et companies in the world In 20 nce," for its 2004 London tour Ii	sco Ballet has e as well as the , Willam, and F of Helgi Tomass 05, San France n 2006, San Fra	first production of Harold Christensen, San son for more than two sco Ballet won the
<b>4</b> b	(Code ) (Expenses \$ 3,5 San Francisco Ballet Association operates the San Francisco B faculty It emphasizes a strong classical technique and a flow favored by the Ballet Girls and boys aged 6 to 18 follow a si accordance with their age and physical development. The pri character dance and music Seminars on nutrition and related and housing scholarships to intermediate and advanced level Approximately forty percent of the dancers in the Ballet rece companies as American Ballet Theatre, Ballet West, Birmingh York City Ballet, Pacific Northwest Ballet, Pittsburgh Ballet Th professional ballet career-bound students from the US and a	allet School of mover cructured s ogram incl I issues ar students ved all or am Royal eatre and	ment that suggests a ser sequence of training stag udes classes in technique e offered throughout the based on their financial i part of their training at t Ballet, Dutch National & Stuttgart Ballet The Ball	nse of energy, freedom, and joy es designed to increase their teo e, pointe work, pas de deux, me e school year The Ballet School need or potential to achieve a p the Ballet School Students have allet, English National Ballet, Fra let School also operates a summ	is designed and r - reflecting the chnical skills, sten's technique, provides a limit rofessional care also gone on tonkfurt Ballet, M	e kind of dancing camina, and discipline in contemporary and ted number of tuition eer in ballet to dance with such liami City Ballet, New
<b>4c</b>	The Center for Dance Education ("CDE"), a department of the CDE operates programs in schools and the community a	e Ballet, v t large, of	ten in coordination with (	other community-based organiza	outreach and ations Program	ns include after-school
4d	other program services (Describe in Schedule O		in the public schools, sch	ovarsnip programs, adult educat	on, and comm	unity matifiees
	(Expenses \$ including gi	=	\$	) (Revenue \$		)
4e	Total program service expenses \$ 33.8	34 975	Must equal Part I)	C. Line 25. column (B).		

Form **990** (2008)

Part IV	Chec	klist o	f Reauire	d S	chedule	5

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? 😼	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		Νο
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		Νο
5	Section $501(c)(4)$ , $501(c)(5)$ , and $501(c)(6)$ organizations. Is the organization subject to the section $6033(e)$ notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		Νο
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Νο
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Νο
10	Did the organization hold assets in term, permanent,or quasi-endowments? If "Yes," complete Schedule D, Part V 🕏	10	Yes	
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	Yes	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII .	12		No
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Νo
14a	Did the organization maintain an office, employees, or agents outside of the U S ?	14a		Νο
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U S ? If "Yes," complete Schedule F, Part $I$	14b		Νο
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Part II</i>	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		Νο
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17	Yes	
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		Νo
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Νο
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule  J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to question 25	24a	Yes	
Ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Νο
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		Νο
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		Νο
25a	Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Νο
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No

### Part IV Checklist of Required Schedules (Continued)

			Yes	No
8	During the tax year, did any person who is a current or former officer, director, trustee, or key employee			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV	28a		No
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV	28b		Νο
c	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV.	28c	Yes	
9	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🕏	29	Yes	
0	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
1	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
3	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations section 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
4	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	
5	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		No
6	501(c)(3) organizations Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5 percent of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No

Pai	t V Statements Regarding Other IRS Filings and Tax Compliance	e				
					Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal					
	of U.S. Information Returns. Enter -0- if not applicable	_				
		1a	146			
Ь	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0			
c	Did the organization comply with backup withholding rules for reportable payments t	o ven	dors and reportable			
	gaming (gambling) winnings to prize winners?			1c	Yes	
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this					
	return	2a	704			
b	If at least one is reported in 2a, did the organization file all required federal employing			2b	Vaa	
33	<b>Note:</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this Did the organization have unrelated business gross income of \$1,000 or more durin			20	Yes	
Ja	return?	• •	year covered by tims	3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in School	edule (	0	3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a s $$	-	•			
	over, a financial account in a foreign country (such as a bank account, securities ac account)?	count	, or other financial	4a		No
ь	If "Yes," enter the name of the foreign country					
	See the instructions for exceptions and filing requirements for <b>Form TD F 90-22.1</b> , Re	port o	f Foreign Bank and			
	Financial Accounts.					
5a	Was the organization a party to a prohibited tax shelter transaction at any time duri		·	5a		No
Ь	Did any taxable party notify the organization that it was or is a party to a prohibited	tax sh	nelter transaction?	5b		No
c	If "Yes," to 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exemp Tax Shelter Transaction?	t Entit	ry Regarding Prohibited	5c		
6a	Did the organization solicit any contributions that were not tax deductible?	•		6a	Yes	
	If "Yes," did the organization include with every solicitation an express statement th				105	
	were not tax deductible?			6b	Yes	
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization provide goods or services in exchange for any quid pro quo con more?	trıbutı	on of \$75 or	7a	Yes	
ь	If "Yes," did the organization notify the donor of the value of the goods or services p	rovide	d?	7b	Yes	
	Did the organization sell, exchange, or otherwise dispose of tangible personal prope					
	file Form 8282?			7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay	prem	nums on a personal			
	benefit contract?			7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a pers			7f		No
g	For all contributions of qualified intellectual property, did the organization file Form 8		·	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization f	ile a F	orm 1098-C as	7h		
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds a	nd se	ction 509(a)(3)			
	supporting organizations. Did the supporting organization, or a fund maintained by a s	pons	oring organization, have			
	excess business holdings at any time during the year?			8		
9	Section $501(c)(3)$ and other sponsoring organizations maintaining donor advised funds.					
а	Did the organization make any taxable distributions under section 4966?			9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person	?.		9b		
10	Section 501(c)(7) organizations. Enter	ı	1			
	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section F01(c)(12) organizations Enter					
11 a	Section 501(c)(12) organizations Enter  Gross income from members or shareholders					
a	e. e	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources	44.				
	against amounts due or received from them )	11b				
12a	Section $4947(a)(1)$ non-exempt charitable trusts. Is the organization filing Form 990 in	lleu	of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				

Νo

Yes

# Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

section A.	Governing	Body and	Manageme	nt		

the organization's mailing address? If "Yes," provide the names and addresses in Schedule O . . . .

	For each "Yes" response to lines 2-7 below, and for a "No" response to lines 8 or 9b below, descriprocesses, or changes in Schedule O. See instructions.	be the circumstances,			
1a	Enter the number of voting members of the governing body 1a	71			
b	Enter the number of voting members that are independent 1b	67			
2	Did any officer, director, trustee, or key employee have a family relationship or a business rother officer, director, trustee, or key employee?		2		No
3	Did the organization delegate control over management duties customarily performed by or supervision of officers, directors or trustees, or key employees to a management company of		3		No
4	Did the organization make any significant changes to its organizational documents since th filed? $$ .	e prior Form 990 was	4		No
5	Did the organization become aware during the year of a material diversion of the organization	n's assets?	5	Yes	
6	Does the organization have members or stockholders?		6	Yes	
7a	Does the organization have members, stockholders, or other persons who may elect one or governing body?		7a	Yes	
b	Are any decisions of the governing body subject to approval by members, stockholders, or	other persons?	7b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions und year by the following	ertaken during the			
а	the governing body?		8a	Yes	
ь	each committee with authority to act on behalf of the governing body?		8b	Yes	
9a	Does the organization have local chapters, branches, or affiliates?		9a		Νo
b	If "Yes," does the organization have written policies and procedures governing the activities affiliates, and branches to ensure their operations are consistent with those of the organization.	' '	9b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed must describe in Schedule O the process, if any, the organization uses to review the Form 9	_	10	Yes	
11	Is there any officer director or trustee or key employee listed in Part VII Section A who o	annot be reached at	_		

#### Section B. Policies

			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No", go to line 13 $\cdot$ .	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision			
а	The organization's CEO, Executive Director, or top management official?	15a	Yes	
b	Other officers or key employees of the organization?	15b	Yes	
	Describe the process in Schedule O			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable Federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

#### Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed CA
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply

☐ own website ☐ another's website ☑ upon request

- Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization

Kımberly O Carım 455 Franklın Street San Francisco, CA 94102 (415) 861-5600

# Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

#### Section A Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed

Check this box if the organization did not compensate any officer, director, trustee or key employee

- \* List all of the organization's **current** officers, directors, trustees (whether individuals or organizations) and key employees regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid
- \* List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- \* List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- \* List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

The check this box in the organization and i	·	Posit	(C	(C) n (check all apply) (E)	(E)	(F)				
(A) Name and Title	(B) Average hours per week	Individual Trustee or Chrector	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations
							-			

### Part VII Continued

			() Ition that a			all			(E)	(F)
<b>(A)</b> Name and Title	(B) A verage hours per week	Individual Trustee or Director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations
			1							
	ļ			$\vdash \vdash$						
				$\vdash$						
	1									
1b Total			٠.		Ш.		<b>&gt;</b>	1,992,592	2 0	284,954
2 Total number of individuals (including		- V la						00 000	-	•

2 Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization►34

			Yes	No
3	Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee			
	on line 1a? If "Yes," complete Schedule J for such individual	3		Νo
4	For any individual listed online 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such			
	ındıvıdual	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services			
	rendered to the organization? If "Yes," complete Schedule J for such person	5		Νο

#### **Section B. Independent Contractors**

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

(A) Name and business address	(B) Description of services	(C) Compensation
Artsmarketing Services Inc Dept 325 PO Box 8000 Buffalo, NY 142670000	Telefunding and telemarketing	492,892
McCall Associates Events Management Inc 350 Flonda St san francisco, CA 941100000	Event planning and services	381,304
i-de-as The Special Events Company 475 Hampshire St Space 1 san francisco, CA 941100000	Event planning and services	377,515
Gemini Music Productions Inc 2 Iroquois Ave palisades, NY 109640000	Orchestra for peformances in NY	326,713
D's Seven Services Inc 1478 B Street hayward, CA 945412900	Janitonal	178,417
Total number of independent contractors (including those in 1) who refrom the organization	, ,	10

# Statement of Revenue

				(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514
	1a	Federated campaigns .	. <b>1a</b> 18,8	88			
ants Ints	b	Membership dues		76			
Contributions, gifts, grants and other similar amounts	с	Fundraising events		97			
±3 ∓a	d	Related organizations .	1c 4,094,44	80			
%. <u>E</u>	e	Government grants (contribution		<u> </u>			
ੂੰ ਭੂੰ	f	All other contributions, gifts, grai		 85			
bet Fei	-	sımılar amounts not included abo		_			
d H	g	Noncash contributions inc					
೦೯	١.	es 14 11 \$	008,249	24,691,526			
	h	Total (Add lines 1a-1f) .		<u> </u>			
œ.	_		Business Coo	<del> </del>			
nua	2a	performance & touring	711,	<del>                                     </del>			
Pev	b	school/housing/outreac	711,				
16.6	C	workshop	711,	2,283	2,283		
<u>.</u>	d						
E E	e f	All other program assured	rovenus	2,488	2,488		
Program Serwce Revenue	•	All other program service	evenue	2,488	2,488		
<u>Ā</u>	g	Total. Add lines 2a-2f .  ► \$ 19,257,541					
	3	Investment income (includ	ling dividends, interest				
		other similar amounts) .		24,632			24,632
	4	Income from investment of tax-	exempt bond proceeds	38,308			38,308
	5	Royalties		70,509			70,509
		(ı) Rea	l (II) Persona	I			
	6a	Gross Rents	18,656 31,	857			
	b	Less rental expenses					
	С	Rental income or (loss)	18,656 31,	857			
	d	Net rental income or (loss	)	50,513	50,513		
		(ı) Securi	ties (ii) O ther				
	7a	Gross amount from sales of	997,803 2,	304			
		assets other than inventory					
	b		012,750 3,	871			
		sales expenses	11.017	567			
	c d		-14,947 -1,	567 -16,514	-16,514		
	a .	Net gain or (loss)	<u> </u>	<b>▶</b>	10,311		
	8a	Gross income from fundrai events (not including	sing				
۸.		\$615,045					
)nu		of contributions reported o 1c) See Part IV, line 18	n line				
eve.		Attach Schedule G ıf total ex	ceeds				
Ģ.	١.	. ,	a 1,582,6				
Other Revenue	b c	Less direct expenses .  Net income or (loss) from		-674,837	-674,837		
Ö				• 074,037 •	5. 1,057		
	9a	Gross income from gaming activities See part IV, line	19				
		Complete Schedule G if total exceeds \$15,000					
		, -, <del>-</del>	<b>a</b> 3	80			
	b	Less direct expenses .					
	С	Net income or (loss) from	gaming activities	380	380		
	10a	Gross sales of inventory, I	ess				
		returns and allowances .	<b>a</b> 761.2	06			
	b	Less cost of goods sold	701,2				
	с	Net income or (loss) from			115,116	47,626	
		Miscellaneous Revenue	Business Coo				
	11a	expense reimbursement	711,				416
	b	other miscellaneous	711,	120 383			383
	С						
	d	All other revenue					
	e	Total. Add lines 11a-11d .	• • • • • • • • • • • • • • • • • • •	99			]
	12	Total Revenue. Add lines 1		43,605,599	18,732,199	47,626	134,248
		8c, 9c, 10c, and 11e		<b>*</b>			
	1	50, 100, and 116		L	I		Form <b>990</b> (2008)

# Part IX Statement of Functional Expenses

A	Section 501(c)(3) and 501(c)(4) orgall other organizations must complete column (A) but are not re				).
Do r	not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	<b>(B)</b> Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	746,294	746,294		
3	Grants and other assistance to governments, organizations and individuals outside the U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	1,509,837	659,947	703,559	146,331
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	19,285,190	16,311,175		823,328
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	1,325,189	1,316,486	-4,634	13,337
9	Other employee benefits	3,668,640	3,111,865	383,254	173,521
10	Payroll taxes	1,645,967	1,360,891	204,767	80,309
11	Fees for services (non-employees)				
а	Management				
b	Legal	86,247	52,047	34,200	
c	Accounting	138,892		138,892	
d	Lobbying				_
е	Professional fundraising See Part IV, line 17	251,626			251,626
f	Investment management fees				
g	Other	1,184,300	56,487	1,038,307	89,506
12	Advertising and promotion	3,187,541	550,865	2,636,676	
13	Office expenses	1,295,124	881,099	274,006	140,019
14	Information technology	315,418		315,418	
15	Royalties	765,525	765,525		
16	Occupancy	731,449	390,285	316,717	24,447
17	Travel	1,567,344	1,424,462	114,103	28,779
18	Payments of travel or entertainment expenses for any Federal, state or local public officials				
19	Conferences, conventions and meetings				
20	Interest	1,755,786		1,755,786	
21	Payments to affiliates	19,824	19,824		
22	Depreciation, depletion, and amortization	3,126,821	1,768,527	1,358,294	
23	Insurance	270,941	6,600	264,341	
24	Other expenses—Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below )				
а	costumes/sets/props	794,828	794,828		
b	Dance medicine	354,050	354,050		
c	Catering	175,457			175,457
d	UBI Tax	6,827		6,827	
e	facilities allocation	-27,772	2,973,554	-3,222,122	220,796
f	All other expenses	743,186	290,164	372,798	80,224
25	Total functional expenses. Add lines 1 through 24f	44,924,531	33,834,975	8,841,876	2,247,680
26	Joint Costs. Check if if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation		-		· .

Part X	Balance	Sheet
--------	---------	-------

					(A) Beginning of year		(B End of	
	1	Cash—non-interest-bearing	•		5,368,777			9,535,858
	2	Savings and temporary cash investments			915,781			2,532,700
	<del>-</del>   3	Pledges and grants receivable, net			5,561,171			5,552,211
	4	Accounts receivable, net			45,404	-		184,449
	5	Receivables from current and former officers, directors, trustees other related parties Complete Part II of Schedule L				5		
	6	Receivables from other disqualified persons (as defined under spersons described in section 4958(c)(3)(B) Complete Part II of	4958(f)(1)) and		6			
	7	Notes and loans receivable, net				7		
	8	Inventories for sale or use			237,141	8		180,178
Ø	9	Prepaid expenses and deferred charges			1,172,326	9		1,282,509
ëet	10a		-		, ,			
Assets		Land, buildings, and equipment cost basis	10a	54,959,359				
	b	Less accumulated depreciation <i>Complete Part VI of Schedule D</i>	10b	19,634,399	32,908,090	10c	3	5,324,960
	11	Investments—publicly traded securities				11		
	12	Investments—other securities See Part IV, line 11 $Complete Passive Schedule D$	art VII	of		12		
	13	Investments—program-related See Part IV, line 11 $\it Complete P \it of Schedule D$ .	art VII	I		13		
	14	Intangible assets				14		
	15	Other assets See Part IV, line 11 Complete Part IX of Schedule D			24,037,123	15	1	7,069,636
	16	Total assets. Add lines 1 through 15 (must equal line 34)			70,245,813	16	7	1,662,501
	17	Accounts payable and accrued expenses .			6,622,119	17		7,927,296
	18	Grants payable				18		
	19	Deferred revenue			4,355,743	19		5,234,831
	20	Tax-exempt bond liabilities			44,000,000	20	4	4,900,000
<u>0</u>	21	Escrow account liability Complete Part IV of Schedule D				21		
Liabilities	22	Payable to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified						
ä		persons Complete Part II of Schedule L				22		
	23	Secured mortgages and notes payable to unrelated third parties				23		
	24	Unsecured notes and loans payable				24		1,196,911
	25	Other liabilities Complete Part X of Schedule D			408,729	25		457,233
	26	Total liabilities. Add lines 17 through 25			55,386,591	26	5	9,716,271
J.		Organizations that follow SFAS 117, check here 🕨 🔽 and comp	lete li	nes 27				
Balance		through 29, and lines 33 and 34.						
<u>a</u>	27	Unrestricted net assets			2,396,490	27		2,178,741
æ	28	Temporarily restricted net assets			12,462,732	28		9,767,489
Fund	29	Permanently restricted net assets				29		
or Fu		Organizations that do not follow SFAS 117, check here ► ☐ an lines 30 through 34.	plete					
	30	Capital stock or trust principal, or current funds				30		
Assets	31	Paid-in or capital surplus, or land, building or equipment fund			31			
	32	Retained earnings, endowment, accumulated income, or other fu			32			
Š	33	Total net assets or fund balances			14,859,222	33	1	1,946,230
<u>-</u>	34	Total liabilities and net assets/fund balances			70,245,813	34	7	1,662,501
Pa	rt XI	Financial Statements and Reporting						
				_			Yes	No

Dart VI	Einancial	Statements	and D	oporting
7. 1 4 2 . 1 2	FINANCIAL	Statements	ann R	emmetiliki.

	_		
1	Accounting method used to prepare the Form 990		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	No
b	Were the organization's financial statements audited by an independent accountant?	2b	Νo
С	If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	No
b	If "Yes," did the organization undergo the required audit or audits?	3b	

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493134030990

Employer identification number

OMB No 1545-0047

# **Public Charity Status and Public Support**

Department of the Treasury Internal Revenue Service

**SCHEDULE A** 

(Form 990 or 990EZ)

Name of the organization

To be completed by all section 501(c)(3) organizations and section 4947(a)(1)nonexempt charitable trusts.

Attach to Form 990 or Form 990-EZ. See separate instructions.

Open to Public Inspection

San Fr	ancisco	Ballet Associat	tion						141520					
Dai	rt I	Passon	for Bublic C	harity Status (to be co	mplotod	by all or	aanizatio		-1415298 Instruct					
				ation because it is (Please	•	-			msuucu	10115)				
1				nurches, or association of ch					'A )(i).					
2	į.	•		tion 170(b)(1)(A)(ii). (Attac				-, -(-,(-,	/ (- / -					
3	Ė			e hospital service organizati			t ion 170(l	b)(1)(A)(i	ii). (Attac	h Schedu	le H)			
4	į.	•	•	zation operated in conjuncti			•	<i>,</i> , , , , , , , , , , , , , , , , , ,	• •		•			
	·		name, city, and	•					( )( )	. ,. ,				
5	Г	•		or the benefit of a college or	universit	v owned o	r operated	l by a gove	rnmental	unit desc	rıbed ın			
	·			(Complete Part II )		•		, ,						
6	Г				unıt descr	ribed in <b>Se</b>	ction 170	(b)(1)(A)	(v).					
7	Ī	-	A federal, state, or local government or governmental unit described in <b>Section 170(b)(1)(A)(v).</b> An organization that normally receives a substantial part of its support from a governmental unit or from the general public											
	·	_		)(1)(A)(vi) (Complete Par		• •	•			J	•			
8	Г		_	ped in <b>Section 170(b)(1)(A)</b>	•	nplete Par	tII)							
9		An organiz	ation that norma	ally receives (1) more than	331/3% 0	fits supp	ort from c	ontributior	ıs, membe	rship fees	s, and gro	SS		
		receipts fro	om activities rel	ated to its exempt functions	s—subject	to certair	nexceptio	ns, and (2	) no more	than 331/	/3% of			
		ıts support	from gross inve	estment income and unrelate	ed busines	ss taxable	ıncome (l	ess sectio	on 511 ta:	k) from bu	sinesses			
		acquired by	y the organization	on after June 30, 1975 See	Section 5	609(a)(2).	(Complete	e Part III	)					
10	$\sqcap$	An organiza	atıon organızed	and operated exclusively to	test for p	ublic safe	ty See <b>Se</b>	ction 509	( <b>a)(4).</b> (S	ee instruc	tions )			
11	$\Gamma$	An organiza	atıon organızed	and operated exclusively fo	r the bene	fit of, to p	erform the	functions	of, or to o	arry out t	he purpo:	ses of		
				orted organizations describe						Section 5	09(a)(3)	.Check		
			it describes the ype I <b>b</b>	type of supporting organiza		- Function			h <b>d</b>	Γ <sub>Type</sub>	iIII - Otl	har		
e	$\overline{}$	•	• •	rtify that the organization is			-			, ,,				
•	'	•		agers and other than one or			•			•	•			
		section 50		-	·		-				, , ,	•		
f				d a written determination fro	m the IRS	5 that it is	a Type I,	Type II o	r Type III	supportir	ng organiz	zation,		
а		check this		as the organization accepted	d any dift	or contrib	ution from	any of the				ļ		
g		following pe		as the organization accepted	a any gnt	or contrib		any or the	•					
		(i) a perso	n who dırectly o	r indirectly controls, either a	alone or to	gether wi	th persons	describe	d ın (ıı)		Yes	No		
		and (III) be	low, the governı	ng body of the the supported	d organiza	tion?				11g	(i)			
		(ii) a family	y member of a p	erson described in (i) above	?					11g(	(ii)			
		(iii) a 35%	controlled enti	ty of a person described in (	i) or (ii) al	bove?				11g(	iii)			
h		Provide the	following inform	mation about the organizatio	ns the org	ganızatıon	supports			·				
			<b>r</b>		T				1		1			
		ame of	(ii) EIN	(iii) Type of organization		sthe		ou notify		s the	(vii) An			
		oorted nization		(described on lines 1-9 above or IRC section	_	ation in Iisted in		inization i) of your		ation in Irganized	supp	ort		
•	organ	112411011		(See Instructions))		verning		ort?		US?				
						ment?								
					Yes	No	Yes	No	Yes	No				
	-													

Total

# Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I.)

	(Complete only if you chec	keu tile box o	11 IIIIe 5, 7, 0F	o or Part I.)				
	ublic Support		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, , 1				
	endar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	<b>(d)</b> 2007	(e)	2008	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	17,906,273	18,021,214	23,681,845	29,782,531		24,691,526	114,083,389
2	Tax revenues levied for the organization's							_
	benefit and either paid to or expended on its behalf							
3	The value of services or facilities							
	furnished by a governmental unit to the organization without charge							
4	Total. Add line 1-3	17,906,273	18,021,214	23,681,845	29,782,531		24,691,526	114,083,389
5	The portion of total contribution by each							
	person (other than a government unit or publicly supported organization) included on line 1 that exceed 2% of the amount shown on line 11, column							3,076,536
6	(f) <b>Public Support</b> subtract line 5 from line							111,006,853
	4							
T	otal Support							
Cal	endar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	<b>(c)</b> 2006	( <b>d)</b> 2007		2008	<b>(f)</b> Total
7	A mounts from line 4	17,906,273	289,088	23,681,845	29,782,531		24,691,526	114,083,389
8	Gross income from interest, dividends,							
	payments received on securities loans, rents, royalties and income from similar sources	169,681	289,088	1,312,737	744,812		190,660	2,706,978
9	Net income from unrelated business							
	activities, whether or not the business is				12,445		21,644	34,089
10	regularly carried on Other income Do not include gain or loss							
10	from the sale of capital assets (Explain in Part IV )		199,640					199,640
11	Total Support (Add lines 7 through 10)							117,024,096
12	Gross receipts from related activities, etc	(See instruction	s )			12		92,284,073
13	First Five Years. If the Form 990 is for the	organızatıon's fıı	rst, second, third	d, fourth, or fifth	tax year as a 5			
	organization, check this box and <b>stop here</b>							<b>▶</b> ┌
	omputation of Public Support Perc							
14	Public Support Percentage for 2008 (line 6		•	olumn (f))		14		94.860 %
15	Public Support Percentage for 2007 Sched	ule A , Part IV - A	, line 26f			15		71.000 %
16a	33 1/3% Test - 2008. If the organization did		·		3 1/3% or more,	check	this box	<b>P</b> .C7
Ь	and <b>stop here.</b> The organization qualifies as <b>33 1/3% Test - 2007.</b> If the organization div		-		15 ıs 33 1/3% o	r more	, check th	<b>▶</b>  ✓ s
	box and <b>stop here.</b> The organization qualifie							<b>▶</b> □
17a	10% Facts and Circumstances Test - 2008.	•			•			
	more, and if the organization meets the "fac organization meets the "facts and circumst							w the
ь	10% Facts and Circumstances Test - 2007.			•		-		•
_	more, and if the organization meets the "fac							
	the organization meets the "facts and circu	mstances" test	The organization	n qualifies as a	publicly suppor	ted or	ganızatıon	<b>►</b> □
18	<b>Private Foundation.</b> If the organization did	not check the bo	ox on line 13, 16	sa, 16b, 17a or	17b, check this	box a	nd see	<b>.</b>

Pa	Support Schedule for On (Complete only if you ched				(2)		
	ction A. Public Support		_	,			
Cale	ndar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
2	include any "unusual grants ") Gross receipts from admissions,						
2	merchandise sold or services performed,						
	or facilities furnished in any activity that						
	is related to the organization's tax-						
	exempt purpose						
3	Gross receipts from activities that are						
	not an unrelated trade or business under						
	section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
_	organization without charge						
6	Total Add lines 1-5						
7a	A mounts included on lines 1, 2, and 3						
	received from disqualified persons Amounts included on lines 2 and 3						
D	received from other than disqualified						
	persons that exceed the greater of 1% of						
	the total of lines 9, 10c, 11, and 12 for						
	the year or \$5,000						
c	Total of lines 7a and 7b						
8	Public Support (Substract line 7c from						
_	line 6)						
То	tal Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9	A mounts from line 6						
10a	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties and income from similar						
	sources						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after 30 June, 1975		+				
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is regularly						
	carried on						
12	Other income Do not include gain or loss						
	from the sale of capital assets						
	(Explain in Part IV )						
13	Total Support (Add lines 9, 10c, 11 and						
	12)						
14	First Five Years If the Form 990 is for the	organızatıon's fı	rst, second, thir	d, fourth, or fifth	ntax year as a 5	01(c)(3) organı	zation,
	check this box and <b>stop here</b>						<b>▶</b> □
	manufaction of Dublic Compact Days						
15	mputation of Public Support Perc Public Support Percentage for 2008 (line		dod by line 12 o	olumn (fl)		T 4= T	
			•	.orumin (1))		15	
16	Public Support Percentage for 2007 Sche	dule A , Part IV -	A, line 27g			16	
		D					
Co	mputation of Investment Income Investment Income Percentage for 2008 (			ne 13 column /f	<u> </u>	17	
				-	"	17	
ΤQ	Investment Income Percentage from 2007	ocnequie A , Pa	TLIV-A, IINE 2/	H		18	

19a 33 1/3% Tests - 2008. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line

17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization **33 1/3% Tests - 2007.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2008

**▶**□

Part IV	<b>Supplemental Information.</b> Complete this part to provide the information required by Part II, line 10; Part II, line 17a or 17b, or Part III, line 12. Provide and any other additional information. (see instructions)								
	Facts and Circumstances Test								

Schedule A (Form 990 or 990-EZ) 2008

Software ID: Software Version:

**EIN:** 94-1415298

Name: San Francisco Ballet Association

#### Form 990, Part VII - Section Aaa

Form 990, Part VII - Section Aaa	1									
		Posit t	(C non ( hat a	chec		I			(E)	<b>(F)</b>
<b>(A)</b> Name and Title	(B) Average hours per week	Individual Trustee or Director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations
Helgı Tomasson , Artıstıc Dırector	50 00	X						536,204	0	135,998
M Glenn McCoy , Executive Director	50 00	Х		Х				310,865	0	18,382
Richard C Barker , Chair of the Board	10 00	Х		Х				0	0	0
Chrıs Hellman , Chaır Emeritus	2 00	Х		Х				0	0	0
James H Herbert II , Past Chair	2 00	Х		Х				0	0	0
J Stuart Francis , Vice Chair	5 00	Х		Х				0	0	0
Margaret G Gill , Vice Chair	5 00	Х		Х				0	0	0
Lucy Jewett , Vice Chair	5 00	Х		Х				0	0	0
Paul G Lego , Vice Chair	5 00	Х		Х				0	0	0
James D Marver , Vice Chair	5 00	Х		Х				0	0	0
Carl F Pascarella , Vice Chair	5 00	Х		Х				0	0	0
Robert M Smelick , Vice Chair	5 00	Х		Х				0	0	0
Diane B Wilsey , Vice Chair	5 00	Х		Х				0	0	0
Hank J Holland , Treasurer	5 00	Х		Х				0	0	0
Jennifer J McCall , Secretary	5 00	Х		Х				0	0	0
Susan S Briggs , Assistant Secretary	2 00	Х		Х				0	0	0
Michael C Abramson , Board Member	2 00	Х						0	0	0
Jola Anderson , Board Member	2 00	Х						0	0	0
Kristen A Avansino , Board Member	2 00	Х						0	0	0
Rosemary B Baker , Board Member	2 00	Х						0	0	0
Wendy Wasson Bıngham , Board Member	2 00	Х						0	0	0
Deborah Boccı , Board Member	2 00	Х						0	0	0
Marjorie Burnett , Board Member	2 00	Х						0	0	0
Jennıfer Caldwell , Board Member	2 00	Х						0	0	0
Beth F Cobert , Board Member	2 00	Х						0	0	0
Anne D Copeland , Board Member	2 00	Х						0	0	0
Mary B Cranston , Board Member	2 00	Х						0	0	0
Stephanie Ejabat , Board Member	2 00	Х						0	0	0
Peter E Engel , Board Member	2 00	Х						0	0	0
Jacqueline L Erdman , Board Member	2 00	X						0	0	0

Form 990, Part VII - Section Aaa

Form 990, Part VII - Section Aaa	a									1
	(C) Position (check all that apply)								(E)	(F)
<b>(A)</b> Name and Title	(B) Average hours per week	Individual Trustee or Director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations
Sonia H Evers , Board Member	2 00	Х						0	0	0
Irwin Federman , Board Member	2 00	Х						0	0	0
Jason M Fish , Board Member	2 00	Х						0	0	0
Ann C Fisher , Board Member	2 00	Х						0	0	0
Richard N Goldman , Board Member	2 00	Х						0	0	0
Kathryn A Hall , Board Member	2 00	Х						0	0	0
Jeffrey P Hays MD , Board Member	2 00	Х						0	0	0
Libby Heimark , Board Member	2 00	Х						0	0	0
Ingrid v M Hills , Board Member	2 00	Х						0	0	0
Thomas E Horn , Board Member	2 00	Х						0	0	0
Donald F Houghton , Board Member	2 00	Х						0	0	0
Charles A James , Board Member	2 00	Х						0	0	0
Christopher P Johns , Board Member	2 00	Х						0	0	0
Mary Jo Kovacevich , Board Member	2 00	Х						0	0	0
Marıssa Mayer , Board Member	2 00	Х						0	0	0
Kenneth P McNeely , Board Member	2 00	Х						0	0	0
Alexander R Mehran , Board Member	2 00	Х						0	0	0
Byron R Meyer , Board Member	2 00	Х						0	0	0
James E Milligan , Board Member	2 00	Х						0	0	0
John S Osterweis , Board Member	2 00	Х						0	0	0
John F Powers , Board Member	2 00	Х						0	0	0
Christine Russell , Board Member	2 00	Х						0	0	0
O J Shansby , Board Member	2 00	Х						0	0	0
Christine E Sherry , Board Member	2 00	Х						0	0	0
Charlotte M Schultz , Board Member	2 00	Х						0	0	0
David Stanton , Board Member	2 00	Х						0	0	0
Fran A Streets , Board Member	2 00	Х						0	0	0
Judy C Swanson , Board Member	2 00	Х						0	0	0
Patrıcıa A TeRoller , Board Member	2 00	Х						0	0	0
Richard J Thalheimer , Board Member	2 00	Х						0	0	0

Form 990, Part VII - Section Aaa

roilli 990, Pait VII - Section Aaa	1									
		Posit t	(C non ( hat a	chec		I				(F)
<b>(A)</b> Name and Title	(B) Average hours per week	Individual Trustee or Director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations
Susan A Van Wagner , Board Member	2 00	Х						0	0	0
Lonna Wais , Board Member	2 00	X						0	0	0
Tracey B Warson , Board Member	2 00	X						0	0	0
Paul L Wattıs III , Board Member	2 00	Х						0	0	0
Timothy C Wu , Board Member	2 00	X						0	0	0
Akıko Yamazakı , Board Member	2 00	Х						0	0	0
Janice H Zakin MD , Board Member	2 00	Х						0	0	0
Shannon Cronan , Associate Trustee	2 00	Х						0	0	0
Christina E A Hecht , Associate Trustee	2 00	Х						0	0	0
Trisha Weaver , Associate Trustee	2 00	Х						0	0	0
Kimberly O Carim , Chief Financial Officer	40 00			х				145,128	0	8,534
Thomas W Flynn , Director of Development	43 00				х			169,268	0	9,466
Julie A Butt , Director of Mktg & Comm	50 00				Х			153,716	0	21,119
Yuan-Yuan Tan , Prıncıpal Dancer	40 00					Х		145,172	0	18,464
Martın West , Musıc Dırector	40 00					Х		140,118	0	8,333
Kevin T Kirby , AUDIO ENGINEER	40 00					Х		138,626	0	9,725
Tina LeBlanc Jerkunica , Principal Dancer	40 00					х		127,453	0	27,665
Kathryn C Crutcher , Prıncıpal Dancer	40 00					Х		126,042	0	27,268

#### Form 990, Part I, Line 1 - Briefly describe the Organization's mission or most significant activities:

The purposes for which the Association is organized are: to develop and advance the art of ballet dance in all its forms, and, particularly, to maintain a Company of highly trained dancers to perform and give dance concerts, on stage, television and other places; to develop repertory from choreographic and other artistic resources both within and from outside the Company, and to produce, direct and finance all such performances; to operate a School for the teaching of, and for educating persons in, the art of ballet dance and its affiliated arts in all their forms, including music, choreography, pantomime, drama and scenic effects; and to arouse public interest in the art of ballet dance and its affiliated arts, and the study and practice of those arts, and to assist in and develop such educational and cultural activities as may be associated with such purposes.

#### Form 990, Part III, Line 1 - Briefly describe the organization's mission:

The purposes for which the Association is organized are: to develop and advance the art of ballet dance in all its forms, and, particularly, to maintain a Company of highly trained dancers to perform and give dance concerts, on stage, television and other places; to develop repertory from choreographic and other artistic resources both within and from outside the Company, and to produce, direct and finance all such performances; to operate a School for the teaching of, and for educating persons in, the art of ballet dance and its affiliated arts in all their forms, including music, choreography, pantomime, drama and scenic effects; and to arouse public interest in the art of ballet dance and its affiliated arts, and the study and practice of those arts, and to assist in and develop such educational and cultural activities as may be associated with such purposes.

OMB No 1545-0047

Open to Public Inspection

e Year

#### **SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

► Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Supplemental Financial Statements

**Employer identification number** Name of the organization San Francisco Ballet Association 94-1415298 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate Contributions to (during year) 3 Aggregate Grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised ┌ No funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically importantly land area Preservation of certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation ease

	on the last day of the tax year	1156176	ition easement
			Held at the End of th
а	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
С	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after 8/17/06	2d	

- Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year 🕨
- Number of states where property subject to conservation easement is located
- Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds?
- Staff or volunteer hours devoted to monitoring, inspecting and enforcing easements during the year 🕨
- 7 A mount of expenses incurred in monitoring, inspecting, and enforcing easements during the year 🕨 \$
- Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ı) and 170(h)(4)(B)(ıı)?
- In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

#### Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

- If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items
- If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items
  - (i) Revenues included in Form 990, Part VIII, line 1

For Paperwork Reduction Act Notice, see the Intructions for Form 990

(ii) Assets included in Form 990, Part X

- If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items
- Revenues included in Form 990, Part VIII, line 1

**►** \$

Assets included in Form 990, Part X

Cat No 52283D

Schedule D (Form 990) 2008

ar	<b>Till</b> Organizations Maintaining Collections of Art,	His	<u>tori</u>	cal Treasu	res, or Othe	er Similai	<sup>r</sup> Asse	ts (co	ntınued)
3	Using the organization's accession and other records, check any items (check all that apply)	of th	e foll	owing that are	a sıgnıfıcant ı	use of its co	llection	ו	
а	Public exhibition	d	$\sqcap$	Loan or exch	ange programs	5			
b	Scholarly research	e	Γ	Other					
С	Preservation for future generations								
1	Provide a description of the organization's collections and explain Part XIV	n how	v they	further the o	ganızatıon's e	xempt purp	ose in		
5	During the year, did the organization solicit or receive donations assets to be sold to raise funds rather than to be maintained as p		,			nılar	Г	Yes	┌ No
Pai	t IV Trust, Escrow and Custodial Arrangements.				nization answ	vered "Yes	" to Fo	orm 99	90,
	Part IV, line 9, or reported an amount on Form 99								
la	Is the organization an agent, trustee, custodian or other intermed included on Form 990, Part X?	diary	for c	ontributions o	r other assets	not	Γ	Yes	Г No
b	If "Yes," explain why in Part XIV and complete the following table	е							
							A mou	ınt	
C	Beginning balance				1c				
d	Additions during the year				1d				
e	Distributions during the year				1e				
f	Ending balance				1f				
a:	Did the organization include an amount on Form 990, Part X, line	21?					Γ	Yes	┌ No
	If "Yes," explain the arrangement in Part XIV								
<sup>2</sup> a	rt V Endowment Funds. Complete if the organization								
	(a)Current Year	(b)	<b>)</b> Prior `	rear (c)Two	Years Back (d	Three Years I	Back <b>(e</b>	)Four Ye	ears Back
.a	Beginning of year balance								
b	Contributions								
C	Investment earnings or losses								
d	Grants or scholarships								
e	Other expenditures for facilities and programs								
f	Administrative expenses								
g	End of year balance								
	Provide the estimated percentage of the year end balance held a	s							
a	Board designated or quasi-endowment 100 000 %	_							
	board designated of quasi-endownient.								
b	Permanent endowment 🕨								
C	Term endowment								
a	Are there endowment funds not in the possession of the organiza organization by	tion t	inat a	re neid and ad	iministered for	tne		Yes	No
	(i) unrelated organizations						3a(i)	1	No
	(ii) related organizations						3a(ii)		Νο
b	If "Yes" to 3a(II), are the related organizations listed as required	on S	ched	ule R?			3b	Yes	
ļ	Describe in Part XIV the intended uses of the organization's end								
a l	t VI Investments—Land, Buildings, and Equipmer	1 <b>t.</b> S	<u>ee F</u>	orm 990, Pa	rt X, line 10.				
	Description of investment			Cost or other s (investment)	( <b>b)</b> Cost or other basıs (other)	(c) Deprecia	ation	<b>(d)</b> Boo	k value
a	Land			4,519,388				4	4,519,388
b	Buildings			33,104,288		9,88	6,098	23	3,218,190
c	Leasehold improvements								
d	Equipment			5,552,272		3,08	4,542		2,467,730
e	e Other					3,759	į	5,119,652	

35,324,960

Part VII Investments—Other Securities. See	Form 990, Part X, line 1	2.	
(a) Description of security or cateory (including name of security)	( <b>b)</b> Book value	(c) Method	d of valuation year market value
Financial derivatives and other financial products			
Closely-held equity interests			
Other			
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)			
Part VIII Investments—Program Related. Se	e Form 990, Part X, line	13.	
(a) Description of investment type	(b) Book value	(c) Method	d of valuation year market value
<b>Part IX</b> Other Assets. See Form 990, Part X, col (B) line 13 ) Part X, line 13 Part IX	no 1E		
(a) Descri			(b) Book value
due from san francisco ballet endowment foundation			13,950,954
restricted cash - bond proceeds			2,238,702
bond issuance costs			879,980
Total. (Column (b) should equal Form 990, Part X, col.(B) line			17,069,636
Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability	(b) A mount		
Federal Income Taxes	(b) //modile		
Postretirement benefit obligation	457,233		
- Controlled to the control of the c	107,200		
		1	
		1	
		1	
		1	
		]	
Total. (Column (b) should equal Form 990, Part X, col (B) line 25 )	457,233		

Par	XI Reconciliation of Change in Net Assets from Form 990 to Financial Statemen	ts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	+
9		9	
.0	Total adjustments (net) Add lines 4 - 8	<u> </u>	1
	Excess or (deficit) for the year per financial statements Combine lines 3 and 9  XII Reconciliation of Revenue per Audited Financial Statements With Revenue Per	10	<u> </u>
2411 U	Reconciliation of Revenue per Audited Financial Statements With Revenue per Total revenue, gains, and other support per audited financial statements	1	turii
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	-	
a	Net unrealized gains on investments		
а b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV) 2d		
e	Add lines 2a through 2d	2e	
:	Subtract line 2e from line 1	3	
	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV)		
c	Add lines <b>4a</b> and <b>4b</b>	4c	
	Total Revenue Add lines <b>3</b> and <b>4c.</b> (This should equal Form 990, Part I, line 12)	5	
art	Reconciliation of Expenses per Audited Financial Statements With Expenses	per F	Return
	Total expenses and losses per audited financial statements	1	
	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
c	Losses reported on Form 990, Part IX, line 25 2c		
d	Other (Describe in Part XIV)		
e	Add lines <b>2a</b> through <b>2d</b>	2e	
	Subtract line <b>2e</b> from line <b>1</b>	3	
•	A mounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
Ь	Other (Describe in Part XIV)		
_	Add lines <b>4a</b> and <b>4b</b>	4c	
c	Add lines la dina 12 i i i i i i i i i i i i i i i i i i	-	
c	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	

Ident if ier	Return Reference	Explanation
		Reserve liquidity including, but not limited to, meeting collateral posting requirements on interest rate swap

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DLN: 93493134030990

Employer identification number

OMB No 1545-0047

2008

Open to Public Inspection

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Attach to Form 990 or Form 990-EZ. Must be completed by organizations that answer "Yes" to Form 990, Part IV, lines 17, 18, or 19, and by organizations that enter more than \$15,000 on Form 990-EZ, line 6a.

Supplemental Information Regarding

**Fundraising or Gaming Activities** 

Name of the organization San Francisco Ballet Association

94-1415298

#### Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

- 1 Indicate whether the organization raised funds through any of the following activities Check all that apply
- a Mail solicitations e V So
- b Email solicitations
  c Phone solicitations
- d 

  ✓ In-person solicitations

- e 🔽 Solicitation of non-government grants
  - f 🔽 Solicitation of government grants
- 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising activities?
- **b** If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. Form 990-EZ filers are not required to complete this table.

(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		fundraiser have custody or control of contributions?		fundraiser have custody or control of contributions?		fundraiser have custody or control of contributions?		fundraiser have custody or control of contributions?		fundraiser have custody or control of contributions?		fundraiser have custody or control of contributions?		fundraiser have custody or control of contributions?		fundraiser have custody or control of contributions?		fundraiser have custody or control of		fundraiser have custody or control of		(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization
		Yes	No																							
Artsmarketing Services	Telefunding		No	547,797	251,626	296,171																				
Total			<b>F</b>																							

List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing

Pai	t I	Fundraising Events. Compare than \$15,000 on Form					repor	ted
		· ,	(a) Event #1	<b>(b)</b> Event #2	(c) Other Events	( <b>d)</b> ⊤o	tal Eve	
			opening night gala	student showcase	2	(Add co	( <b>a)</b> th of <b>(c)</b> )	rough
			(event type)	(event type)	(total number)			
Ж	1	Gross receipts	1,822,829	185,629	189,284		2,19	7,742
Revenue	2	Less Charitable contributions	1,412,438	89,847	80,412		1,58	2,697
	3	Gross revenue (line 1 minus line 2)	410,391	95,782	108,872		61	5,045
	4	Cash Prizes						
Direct Expenses	5	Non-cash Prizes	54.000	16.000				
хрег	6	Rent/Facility costs	54,080					0,080
ਹ ਹ	7	Other direct expenses	998,927	80,289	140,586			9,802
Dire	8	Direct expense summary Add line	es 4 through 7 in column	(d)			1,28	9,882
	9	Net income summary Combine lir	nes 3 and 8 ın column (d)	)	🕨		-67	4,837
Par	t II	<b>Gaming.</b> Complete if the or \$15,000 on Form 990-EZ, lin		"Yes" to Form 990, Pa	rt IV, line 19, or repo	rted mo	re thai	า
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) O ther gaming	(d) Tota col (a) t	ıl gamıng hrough co	
œ	1	Gross revenue						
မှာ	2	Cash prizes						
Direct Expenses	3	Non-cash prizes						
面 닷	4	Rent/facility costs						
౼	5	Other direct expenses						
	6	Volunteer labor	┌ Yes	┌ Yes%	┌ Yes <u> </u>			
	7	Direct expense summary Add lines	s 2 through 5 in column (	d)				
	8	Net gaming income summary Com	bine lines 1 and 7 in colu	ımn (d)	🕨			
9	Ent	ter the state(s) in which the organiza	tion operates gaming ac	tivities			Yes	No
а	Ιs	the organization licensed to operate	gamıng actıvıtıes ın each	n of these states?		· 9a		<u> </u>
Ь	If "	No," Explain						
10a	— We	re any of the organization's gaming l	ıcenses revoked, suspen	ided or terminated during	the tax year?	 10a		
b	If"	Yes," Explain						
11		os the organization energia samura	ictivities with name	are?				
11 12		es the organization operate gaming a the organization a grantor, beneficiar				11	1	$\vdash$
		med to administer charitable gaming						

			 <del></del>
13	Indicate the percentage of gaming activity operated in		
а	The organization's facility		
b	An outside facility		
14	Provide the name and address of the person who prepares the organization's gaming/special events books and records		
	Name •		
	Address •		
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	15a	
Ь	If "Yes," enter the amount of gaming revenue received by the organization <b>&gt;</b> \$ and the amount of gaming revenue retained by the third party <b>&gt;</b> \$		
c	If "Yes," enter name and address		
	Name •		
	Address 🟲		
16	Gaming manager information		
	Name 🟲		
	Gaming manager compensation 🕨 \$		
	Description of services provided 🟲		
	Director/officer Employee Independent contractor		
17	Mandatory distributions		
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?	17a	
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year 📂 💲		

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Schedule I

**Grants and Other Assistance to Organizations,** Governments and Individuals in the U.S.

OMB No 1545-0047

2008

DLN: 93493134030990

Department of the Treasury Internal Revenue Service Name of the organization

San Francisco Ballet Association

(Form 990)

Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22. Attach to Form 990.

Open to Public **Inspection** 

Employer identification number

San Francisco Banet Associat	1011					94-1415298	
Part I General Infor	mation on Gra	nts and Assistance	e			•	
<ul><li>Does the organization m the selection criteria use</li><li>Describe in Part IV the organization</li></ul>	ed to award the gra	nts or assistance?			gibility for the grants or a		▼Yes   □
Form 990, Part Part IV and Sch	IV, line 21 for ai nedule I-1 if addi	ny recipient that rece tional space is	eived more than \$5,0	00. Check this box	tes. Complete if the of if no one recipient rec	ceived more than \$5,	
1(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	137	(h) Purpose of grant or assistance
2 Enter total number of se	ction 501(c)(3) and	d government					
organizations 3 Enter total number of oth					• <u></u>	<u></u>	•
For Paperwork Reduction Act No	tice, see the Instruc	tions for Form 990.		Cat No 50055	Р	Sc	hedule I (Form 990) 2008

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) if additional space is needed.

(a)Type of grant or assistance	( <b>b)</b> Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
Housing Scholarship	31	126,400			
School Scholarship	280	619,894			

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

See Additional	Data Table
----------------	------------

Ident if ier	Return Reference	Explanation
Procedure for Monitoring Grants in the U S	,	Schedule I, Part I, Line 2 The Ballet School provides a limited number of scholarships to intermediate and advanced level students based on their financial need or potential to achieve a professional career in ballet Students' progress and enrollment is monitored as a routine part of their Ballet School studio work

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DLN: 93493134030990

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

### **Compensation Information**

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

► Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23.

**2008** 

Open to Public Inspection

Name of the organization San Francisco Ballet Association  ${\bf Employer\ identification\ number}$ 

94-1415298

Pa	rt I Questions Regarding Compensation	n				
					Yes	Νo
1a	Check the appropriate box(es) if the organization pro 990, Part VII, Section A, line 1a Complete Part III					
	First class or charter travel	Γ	Housing allowance or residence for personal use			
	Travel for companions	Γ	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	⊽	Health or social club dues or initiation fees			
	Discretionary spending account	⊽	Personal services (e g , maid, chauffeur, chef)			
ь	If line 1a is checked, did the organization follow a wi provision of all the expenses described above? If "N			1b	Yes	
2	Did the organization require substantiation prior to rofficers, directors, trustees, and the CEO/Executive			2	Yes	
3	Indicate which, if any, of the following the organization organization's CEO/Executive Director Check all the	nat appl	ly			
	Compensation committee	<u> </u>	Written employment contract			
	Independent compensation consultant	ļ	Compensation survey or study			
	Form 990 of other organizations	-	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990,	Part V I	I, Section A, line 1a			
а	Receive a severance payment or change of control p	paymen	t?	4a		Νo
b	Participate in, or receive payment from, a suppleme	ntal nor	nqualified retirement plan?	4b		Νo
c	Participate in, or receive payment from, an equity-b	ased co	ompensation arrangement?	4с		Νo
	If "Yes" to any of lines 4a-c, list the persons and pr	ovide tl	he applicable amounts for each item in Part III			
	501(c)(3) and 501(c)(4) organizations only must co	mplete	lines 5-8.			
5	For persons listed in form 990, Part VII, Section A, compensation contingent on the revenues of	lıne 1a	, did the organization pay or accrue any			
а	The organization?			5a		Νo
Ь	Any related organization?			5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in form 990, Part VII, Section A, compensation contingent on the net earnings of	lıne 1a	, did the organization pay or accrue any			
а	The organization?			6a		Νo
b	Any related organization?			6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in form 990, Part VII, Section A, payments not described in lines 5 and 6? If "Yes," o			7		No
8	Were any amounts reported in Form 990, Part VII, psubject to the initial contract exception described in the part III					

#### Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations described in the instructions on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(1)-(111) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of	W-2 and/or 1099-MIS	SC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other compensation	compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
Helgı Tomasson	(I) (II)	520,204		16,000	117,589	18,409	672,202	292,600
M Glenn McCoy	(I) (II)	250,365	40,000	20,500	4,361	14,021	329,247	137,024
Kımberly O Carım	(I) (II)	123,243	10,000	11,885	918	7,616	153,662	77,250
Thomas W Flynn	(I) (II)	143,768	10,000	15,500	1,666	7,800	178,734	103,915
Julie A Butt	(I) (II)	135,616	10,000	8,100	2,120	18,999	174,835	77,250
Yuan-Yuan Tan	(I) (II)	129,672		15,500	13,505	4,959	163,636	
Tına LeBlanc Jerkunıca	(I) (II)	121,963		5,490	12,767	14,898	155,118	
Kathryn C Crutcher	(I) (II)	126,042			12,366	14,902	153,310	
	(i)							
	(ii)							
	(i)							
	(ii) (i)							
	(ii)							
	(i)							
	(ii)							

#### Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

Ident if ier	Return Reference	Explanation
-		
	·	

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**Supplemental Information on Tax Exempt Bonds** 

OMB No 1545-0047

DLN: 93493134030990

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Department of the Treasury Internal Revenue Service

San Francisco Ballet Association

Schedule K

(Form 990)

To be completed by organizations that answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Schedule O.

Name of the organization

**Employer identification number** 94-1415298

										94-1415	290			
Pa	rt I Bond Issues (Required	for 2008)												
	(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date	Issued	(e) Issue	e Price	(f) Des	(f) Description of Purpose		(g) Defeased		(h) O n Behalf of Issuer	
											Yes	No	Yes	No
A	ca infrastructure & econ development bank	63-0304653	13033wr54	08-01-	2008	44,9	900,000	REFUND SE	RIES 2006	5 BONDS		х		×
Pa	rt III Proceeds (Optional for	2008)									•			
1	1 Total Proceeds of Issue			A	\	E	3	(	:	D			E	
2	Gross Proceeds in Reserve Funds													
3	Proceeds in Refunding or Defeasance Escrows													,
4	Other Unspent Proceeds													
5	Issuance Costs from Proceeds													
6	Working Capital Expenditures from Proceeds													
7	Capital Expenditures from Proceeds													
8	Year of Substantial Completion													
				Yes	No	Yes	No	Yes	No	Yes	No	Yes	s	No
9	Were the bonds issued as part of a	current refunding iss	sue?											
10	Were the bonds issued as part of a	ın advance refundıng ı	ıssue?											
11	Has the final allocation of proceed	s been made?												
12	Does the organization maintain ad final allocation of proceeds?	equate books and rec	ords to support the											
Par	t III Private Business Use	(Optional for 2008)	)											
				A		E	3	(	}	D			E	
				Yes	No	Yes	No	Yes	No	Yes	No	Yes	5	No
1	Was the organization a partner in a which owned property financed by		mber of an LLC,											
2	Are there any lease arrangements with respect to the financed property which may result in private business use?													
For F	Paperwork Reduction Act Notice, see the	e Instructions for Form	990.			Cat No 501	.93E			Sc	hedule K	(Form 99	0) 2008	3

Schedule K	(Form 990) 20	800	
Part III	Private Bu	siness Use	(Continued)

		4	A	E	3	(	С	I	D	I	E
		Yes	No								
3a	Are there any management or service contracts with respect to the financed property which may result in private business use?										
3b	Are there any research agreements with respect to the financed property which may result in private business use?										
3с	Does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts or research agreements relating to the financed property?										
4	Enter the percentage of financed property used in a private business use by entities other than a 501(c)(3) organization or a state or local government										
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another 501(c)(3) organization, or a state or local government										
6	Total of lines 4 and 5										
7	Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?										
Pai	rt IV Arbitrage (Optional for 2008)										
		ı	Α	E	3	С		D		E	
		Yes	No								
1	Has a Form 8038-T been filed wth respect to the bond issue?										
2	Is the bond issue a variable rate issue?										
3a	Has the organization or the government issuer identified a hedge with respect to the bond issue on its books and records?										
ь	Name of provider										
С	Term of hedge										
4a	Were gross proceeds invested in a GIC?										
ь	Name of provider										
С	Term of GIC										
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?										
5											
	Were any gross proceeds invested beyond an available temporary period?										

#### DLN: 93493134030990

## OMB No 1545-0047

2008

Open to Public Inspection

# Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or Form 990-EZ. ► To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V lines 38b or 40b.

**Transactions with Interested Persons** 

Name of the organization **Employer identification number** San Francisco Ballet Association 94-1415298 **Part I** Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only). To be completed by organizations that answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b (c) Corrected? (a) Name of disqualified person 1 (b) Description of transaction Yes No

2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under f 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization .

#### Loans to and/or From Interested Persons

To be completed by organizations that answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a

(a) Name of interested person and purpose	(b) Loan from t organizat	he	(c)O riginal principal amount	(d)Balance due	(e) defa	ult?	(f Appr by boo	oved ard or	( <b>g)</b> Wr agreer	
	То	From			Yes	No	Yes	No	Yes	No
Total			<b>&gt;</b> \$	•		•				

#### **Grants or Assistance Benefitting Interested Persons** Part III

To be completed by organizations that answered "Yes" on Form 990, Part IV, line 27.

(a) Name of Interested person	( <b>b)</b> Relationship between interested person and the organization	(c)A mount of grant or type of assistance

#### **Business Transactions Involving Interested Persons**

To be completed by orga	nizations that answered	<u>"Yes" on Form 990,</u>	Part IV, line 28a, 28b, or 28c		
(a) Name of interested person	(b) Relationship between interested person and the	(c) A mount of transaction	(d) Description of transaction	organi	aring of zation's nues?
	organization			Yes	No
FIRST REPUBLIC BANK	tHE board of trustees IMMEDIATE PAST chair is CEO of First Republic Bank	1,196,911	Line of credit at First Republic Bank		No
FIRST REPUBLIC BANK	tHE board of trustees IMMEDIATE PAST chair is CEO of First Republic Bank	3,194,800	Unused letters of credit at First Republic Bank		No
FIRST REPUBLIC BANK	tHE board of trustees IMMEDIATE PAST chair is CEO of First Republic Bank	44,000,000	Nonrevolving term loan at First Republic Bank		No
Pacific Gas & Electric	Trustee is President of PG&E	143,984	Payment of Utilities		Νο
JP MORGAN	Trustee is Vice Chairman & Head of Investment Banking, Western US JP Morgan	806,545	Underwriting services for tax- exempt bonds, remarketing services for tax exempt bonds, interest rate swap counterparty		No
AT&T	Trustee is President- California of AT&T	391,747	Payment of Utilities		Νο

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(b)

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(d)

OMB No 1545-0047

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#### SCHEDULE M (Form 990)

Department of the Treasury

To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990

**Non-Cash Contributions** 

Internal Revenue Service

(a)

Name of the organization San Francisco Ballet Association **Employer identification number** 94-1415298 Part I Types of Property

(c)

		Check If	Number of Contributions	Revenues reported on Form 990, Part VIII, line	Method of de reven		iing	
		applicable		1 g				
1	Art—Works of art							
2	Art—Historical treasures .							
3	Art—Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities—Publicly traded .	Х	40	997,803	COST OR SELLING	PRICE	Ē	
10	Securities—Closely held stock .							
11	Securities—Partnership, LLC, or trust interests							
12	Securities—Miscellaneous							
13	Qualified conservation contribution (historic structures)							
14	Qualified conservation contribution (other)							
15	Real estate—Residential .							
16	Real estate—Commercial							
17	Real estate—Other							
18	Collectibles							
19	Food inventory	Х	9	0				
20	Drugs and medical supplies .							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
	Other (describe			_				
	legal,other )	X	38	0				
	Other (describe discount )	X	1	0				
	Other (describe)				 			
29	Number of Forms 8283 received which the organization complete Acknowledgement			ar for contributions for	29			
							Yes	No
30a	During the year, did the organiza	ition receiv	e by contribution any prope	rty reported in Part I, lines	1-28 that it must			
	hold for at					i		
	least three years from the date of			not required to be used for	exempt purposes			NI.
	for the entire holding period? .					30a		No_
Ь	If "Yes", describe the arrangeme	ent in Part 1	I					
31	Does the organization have a gif	·		·		31	<u> </u>	No
32a	Does the organization hire or use contributions?	e third part	es or related organizations	to solicit, process, or sell	non-casn	32a		No
Ь	If "Yes", describe in Part II							<u></u>
33	If the organization did not report	: revenues i	n Column (c) for a type of p	roperty for which Column (a	a) is			
	checked, describe in Part II							
For P	Paperwork Reduction Act Notice, see	the Instruc	tions for Form 990.	Cat No 51227J	Schedule	M (Forn	n 990)	2008

Part II Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.								
Identifier	ReturnReference	Explanation						
240111111	Notal III Colored	Explanation						
	1	1						

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### **SCHEDULE 0**

(Form 990)

Department of the Treasury Internal Revenue Service

# **Supplemental Information to Form 990**

► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008

Open to Public Inspection

Name of the organization San Francisco Ballet Association Employer identification number

94-1415298

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 5		In May 2009, the Ballet experienced a misappropriation of funds perpetrated through unauthorized access to an online banking application outside of its own computer network. The incident was reported to the Finance Committee chair and the Board Chair of the Association, and the Secret Service was involved in the investigation. The misappropriated funds were returned in full within 10 days. The incident was not reported to the Ballet's insurance company as no loss was incurred. An independent forensic analysis was conducted on the computer of the employee whose login and password were compromised.

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 6		Any natural person shall be eligible to be a member of the Association (a 'Member'), but no legal person which is not a natural person, such as a foundation, trust, corporation or partnership, shall be eligible to be a Member A natural person may become a Member by making a minimum contribution to the Association, the amount of such minimum contribution to be determined from time to time by resolution of the Board. In the case of a contribution in property, the determination of the Board, or a Committee of the Board, Subcommittee, Advisory Committee or other person to whom this responsibility is delegated by the Board, as to the value of the property for membership purposes shall be conclusive. The Board may in its discretion where the minimum contribution in the case of a person who has made intangible contributions to the Association in the past. The term of each Member as a Member shall commence when the person makes the requisite contribution to the Association (or the contribution is waived) and shall continue for a period of 12 months thereafter, at the expiration of which period it shall expire

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 7a		Trustees of the Association are elected by the Members for a term of three years

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 7b		Members shall have, in addition to any other rights which may be granted to them under the By Law's or by law, the right to vote (1) for the election of Trustees, (2) on a disposition of all or substantially all of the Association's assets, (3) on a merger of the Association with another corporation, (4) on a dissolution of the Association, (5) on an amendment of the Articles of Incorporation, and (6) on an amendment of the By Law's (unless the By Law amendment is approved by the Board alone in accordance with the terms of the By-Law's)

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 10		The Form 990 was reviewed and approved at a meeting of the Audit Committee. The Form 990 was posted on the Association's Trustee intranet website and Trustees were notified in writing and verbally at a Board meeting of the availablity of the Form 990 for their review.

ldentifier	Return Reference	Explanation							
Form 990, Part VI, Section B, line 12c		Questionnaires are issued annually to employees, Trustees and others who have an annual reporting requirement under the policy. Responses are monitored and outstanding forms are inquired after. Upon receipt, the form is reviewed by the HR Manager (for employees) and the Board Relations Manager (for Trustees) for any known issues or relationships that need to be highlighted. Forms are further reviewed by the CFO Matters requiring attention are reported directly to the Executive Director, who may further report the matter to the Board Chair.							

ldentifier	Return Reference	Explanation						
Form 990, Part VI, Section B, line 15		The Association's process for determining the compensation of the Artistic Director, Executive Director, and the Chief Financial Officer involved analysis of the compensation by the compensation committee, written employment contracts and approval of the contract terms by the compensation committee						

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section C, line 19		The Association does not make its governing documents or conflict of interest policy available to the public its audited financial statements - consolidated with those of the San Francisco Ballet Endowment Foundation - are posted on its wiebsite at www sfballet org

ldentifier	Return Reference	Explanation
Form 990, Part IV, Line 12 and Part XI Line 2a- c		Generally accepted accounting principles requires that the financial statements of the Association be shown consolidated with those of San Francisco Ballet Endow ment Foundation. Such consolidated financial statements are audited by an independent accountant and reviewed by the Audit Committee of the Association. The Association believes at this time that the additional expense required to conduct an independent audit of the Association as a standalone entity is not an effective use of its resources, given that the same effect is accomplished through the required consolidated audit.

ldentifier	Return Reference	Explanation
Schedule G, Part I, Line 2b, Column (V)		The Association pays for fundraising services (telefunding) alone and incurs its own stationery, mailing, postage, list rentals, and other fundraising expenses directly. The Association has not entered into any professional fundraising arrangements under which the Association made payments exclusively for fundraising expense but not for professional fundraising services.

For Paperwork Reduction Act Notice, see the Instructions for Form 990

Cat No 51056K

Schedule O (Form 990) 2008

#### DLN: 93493134030990

# OMB No 1545-0047

**Open to Public** 

# **SCHEDULE R** (Form 990)

Department of the Treasury

▶ Attach to Form 990. To be completed by organizations that answerd "Yes" to Form 990, Part IV, lines 33, 34, 35, 36, or 37.

**Related Organizations and Unrelated Partnerships** 

epartment of the Treasury ternal Revenue Service		See separat	te instructions.			Open to Publi Inspection	С
lame of the organization an Francisco Ballet Association					Employer identific	ation number	
					94-1415298		
Part I Identificatio	n of Disregarded Entities						
Name, address, a	(A) Name, address, and EIN of disregarded entity		(C) Legal domicile (state or foreign country)	( <b>D</b> ) Total income	<b>(E)</b> nd-of-year assets	<b>(F)</b> Direct controlling entity	
Part II Identificatio	n of Related Tax-Exempt Organizat	ions		_			
Name, address, ar	(A) nd EIN of related organization	<b>(B)</b> Primary activity	(C) Legal domicile (state or foreign country)	<b>(D)</b> Exempt Code section	(E) Public charity status (if section 501(c)(3))	<b>(F)</b> Direct controlling entity	
San Francisco Ballet Endowment Fo	undation						
455 Franklın Street san francısco, CA941020000 94-2747262		investment	CA	section 501(c)(3)	11a	N/A	

<b>(A)</b> Name, address, and EIN of related organization	Prim	( <b>B)</b> nary activity	(C) Legal domicile (state or foreign country)	( <b>D</b> ) Direct controlling entity	incom	(E) lominant le(related, lestment, related)	Share	<b>(F)</b> e of total income	<b>(G)</b> Share of end-of- year assets	(H Disprop allocat	l) ortionate tions?	(I) Code V—UBI amount on Box 20 of K-1	Gene mana part	agıng
										Yes	No		Yes	No
Part IV Identification of R	Related	l Organizations	Taxable as	a Corporation	ı or Tr	ust								
(A) Name, address, and EIN of related organization		(B) Primary activity		(C) Legal domicile (state or foreign country)		( <b>D</b> ) Direct contro	olling	(E) Type of entity (C corp, S corp or trust)	(F) Share of total income	end	( <b>G)</b> hare of l-of-yea assets	<b>(H)</b> Percentage r ownership		

No

No No

No

No No No No

No No No No

No

No No

Part V	Transactions with Re	elated Organizations
--------	----------------------	----------------------

Transactions with Related Organizations			
e. Complete line 1 if any entity is listed in Parts II, III or IV		Υe	25
the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
eipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity	1a		
, grant, or capital contribution to other organization(s)	1b		
, grant, or capital contribution from other organization(s)	<b>1</b> c	Υe	ès
ns or loan guarantees to or for other organization(s)	1d		
ns or loan guarantees by other organization(s)	<b>1e</b>	Ye	ès
e of assets to other organization(s)	1f	+	
chase of assets from other organization(s)	1g		
hange of assets	1h		_
se of facilities, equipment, or other assets to other organization(s)	<b>1</b> i		
se of facilities, equipment, or other assets from other organization(s)			
k Performance of services or membership or fundraising solicitations for other organization(s)			_
Performance of services or membership or fundraising solicitations by other organization(s)			_
m Sharing of facilities, equipment, mailing lists, or other assets		1	_
rring of paid employees	1n	Ye	<b>:</b> s
mbursement paid to other organization for expenses	10		
mbursement paid by other organization for expenses	1p	Ye	<u>:</u> s
per transfer of cash or property to other organization(s)	10	+	
	1r	_	_
	e. Complete line 1 if any entity is listed in Parts II, III or IV  the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?  eipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity , grant, or capital contribution to other organization(s) , grant, or capital contribution from other organization(s) ns or loan guarantees to or for other organization(s) ns or loan guarantees by other organization(s) e of assets to other organization(s) chase of assets from other organization(s) hange of assets se of facilities, equipment, or other assets to other organization(s) formance of services or membership or fundraising solicitations for other organization(s) ring of facilities, equipment, mailing lists, or other assets suring of paid employees  mbursement paid to other organization for expenses	e. Complete line 1 if any entity is listed in Parts II, III or IV  the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?  eith of (i) interest (ii) annuities (iii) royalites (iv) rent from a controlled entity  grant, or capital contribution to other organization(s)  grant, or capital contribution from other organization(s)  is or loan guarantees to or for other organization(s)  is or loan guarantees by other organization(s)  chase of assets to other organization(s)  chase of assets from other organization(s)  is of assets from other organization(s)  is of facilities, equipment, or other assets to other organization(s)  is of facilities, equipment, or other assets from other organization(s)  is of facilities, equipment, or other assets from other organization(s)  is ormance of services or membership or fundraising solicitations for other organization(s)  in gring of facilities, equipment, mailing lists, or other assets  in gring of facilities, equipment, mailing lists, or other assets  in gring of paid employees  in bursement paid to other organization for expenses  in bursement paid to other organization for expenses  in bursement paid to other organization for expenses  in the tax year, did the organization for expenses  in the tax year, did the organization is a controlled entity  in the tax year, did the organization is in a controlled entity  in the tax year, did the organization for expenses  in the tax year, did the organization for expenses  in the tax year, did the organization for expenses  in the tax year, did the organization for expenses  in the tax year, did the organization for expenses  in the tax year, did the organization for expenses  in the tax year, did the organization for expenses  in the tax year, did the organization for expenses  in the tax year, did the organization for expenses  in the tax year, did the organization for expenses  in the tax year, did the time is the time in the time is the time is t	c. Complete line 1 if any entity is listed in Parts II, III or IV  the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?  ale pit of (i) interest (ii) annuities (iii) royalites (iv) rent from a controlled entity  agrant, or capital contribution to other organization(s)  agrant, or capital contribution from other organization(s)  as or loan guarantees to or for other organization(s)  as of assets to other organization(s)  chase of assets to other organization(s)  chase of assets from other organization(s)  as of assets to other organization(s)  chase of assets from other organization(s)  as of facilities, equipment, or other assets to other organization(s)  as of facilities, equipment, or other assets from other organization(s)  as of facilities, equipment, or other assets from other organization(s)  as of facilities, equipment, or other assets from other organization(s)  as of facilities, equipment, or other assets from other organization(s)  as of facilities, equipment, or other assets from other organization(s)  as of facilities, equipment, or other assets from other organization(s)  as of facilities, equipment, or other assets from other organization(s)  as of facilities, equipment, or other assets from other organization(s)  as of facilities, equipment, or other assets from other organization(s)  as of facilities, equipment, or other assets from other organization(s)  as of facilities, equipment, or other assets from other organization for expenses  as of facilities, of the facilities of the facilit

2	2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds						
	(A) Name of other organization(s)	<b>(B)</b> Transaction type(a-r)	<b>(C)</b> Amount Involved				
(1)	san Francisco Ballet Endowment Foundation	С	4,094,480				
(2)	san Francisco Ballet Endowment Foundation	Е	84,900,000				
(3)	san Francisco Ballet Endowment Foundation	N	197,265				
(4)	san Francisco Ballet Endowment Foundation	Р	1,512,413				
(5)							
(6)							

#### Part VI Unrelated Organizations Taxable as a Partnership

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

									_																	
<b>(A)</b> Name, address, and EIN of entity	<b>(B)</b> Primary activity	<b>(C)</b> Legal domicile (state or foreign country)	(D) Are all partners section 501(c)(3) organizations?		partners section 501(c)(3) organizations?		partners section		partners section 501(c)(3) organizations?		partners section 501(c)(3) organizations?		partners section 501(c)(3) organizations?	partners section 501(c)(3) organizations	partners section 501(c)(3) organizations?		partners section 501(c)(3) organizations?		partners section 501(c)(3) organizations?		(E) Share of end-of-year assets	(F) Disproprtionate allocations?		(G) Code V—UBI amount on Box 20 of K-1	(H) General or managing partner?	
			Yes	No		Yes	No		Yes	No																
			•	•		•		Cabadul	. D / Farms	9907 2008																